



IFW/

Attorney Docket No.: 1002-04

In re: Application of Véronique Trochon et al.

Serial No.: 10/764,628

Filed: January 26, 2004

For: METHOD OF INHIBITING ANGIOGENESIS OR INVASION OR FORMATION OF METASTASES

**Mail Stop Amendment**

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

A response to the outstanding official action in the above-identified application is enclosed.

- ☐ Small entity status of this application under 37 CFR §1.9 and §1.27 has been established.
- ☒ This is a Petition for an Extension of Time for the period noted below, as well as for any additional period necessary to render this submission timely.
- ☒ No additional fee is required.

|                                             |  |                                         |       | SMALL ENTITY                       |                        | OTHER THAN SMALL ENTITY |                 |        |                 |
|---------------------------------------------|--|-----------------------------------------|-------|------------------------------------|------------------------|-------------------------|-----------------|--------|-----------------|
| TIME EXTENSION PETITION FEE                 |  |                                         |       | No month(s) 2                      |                        | \$0.00                  |                 |        |                 |
| Subtract time extension fee previously paid |  |                                         |       | No month(s)                        |                        | (\$0.00)                |                 |        |                 |
| TOTAL EXTENSION FEE DUE                     |  |                                         |       |                                    |                        | \$0.00                  |                 |        |                 |
| CLAIM FEE                                   |  | CLAIM(S) REMAINING AFTER AMENDMENT      |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | EXTRA CLAIM(S) PRESENT | RATE                    | ADD'L CLAIM FEE |        | ADD'L CLAIM FEE |
| TOTAL                                       |  |                                         | MINUS |                                    | =                      | x 25=                   | \$              | x 50=  | \$              |
| INDEPENDENT                                 |  |                                         | MINUS |                                    | =                      | x 100=                  | \$              | x 200= | \$              |
| <input type="checkbox"/>                    |  | FIRST PRESENTATION OF MULTIPLE CLAIM(S) |       |                                    |                        | + 180=                  | \$              | + 360= | \$              |
|                                             |  |                                         |       |                                    |                        | TOTAL                   | \$              | TOTAL  | \$              |

- ☐ Please charge Deposit Account No. 50-2719 in the amount of \$ \_\_\_\_\_. A duplicate copy of this sheet is enclosed.
- ☒ A check in the amount of \$460.00 is attached.
- ☒ The Commissioner is authorized to charge payment of the following fees associated with this communication or credit

any overpayment to Deposit Account No. 50-2719. A duplicate copy of this sheet is enclosed.

☒ Any filing fees under 37 CFR §1.16 for the presentation of extra claims.

☒ Any patent application processing fees under 37 CFR §1.17.

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460.00 OP

Respectfully submitted,

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